Express Mail Label No. EU49377847945

## U.S. DEPARTMENT OF COMMERCE

RECORDATION FORM COVER SHEET  Patent and Trademark C		
PATENTS	ONLY Docket No. 2024730-7032322001	
To the Commission CD		
To the Commissioner of Patents and Trademarks: Pleas	e record the attached original documents or copy thereof.	
Name of conveying party(ies):     Harold F. Carrison	2. Name and address of receiving party(ies):	
Lex P. Jansen	Name of the part o	
Lex 1. Jansen	Name: SCIMED Life Systems, Inc. Address: One Scimed Place	
☑ Individual(s) ☐ Association	City: Maple Grove State: MN	
☐ General Partnership ☐ Limited Partnership	Zip Code: 55311-1566	
☐ Corporation-State ☐ Other	2.5 0040. 23311 1300	
Additional name(s) of conveying party(ies) attached? ☐ Yes ☑ No  3. Nature of conveyance:		
3. Nature of conveyance:		
☑ Assignment ☐ Merger	Additional name(s) & address(es) attached? ☐ Yes ☑ No	
☐ Security Agreement ☐ Change of Name		
Other:		
Execution Date: September 29, 2003		
4. Application number(s) or patent number(s): *		
If this document is being filed with a new application, the execution date of the application is: September 29, 2003		
A. Patent Application No.(s):	B. Patent No.(s):	
Additional numbers attached?   Yes XINo	•	
5. Name and address of party to whom correspondence concerning	6. Total number of applications and patents involved: 1	
document should be mailed:		
, , , , , , , , , , , , , , , , , , ,	7. Total fee (37 C.F.R. § 3.41): \$40.00	
David T. Burse		
Bingham McCutchen LLP Three Embarcadero Center, Suite 1800	☐ Enclosed	
San Francisco, CA 94111-4067	Authorized to be charged to deposit account 50-2518,	
Can Handisco, CA 74111-4007	referencing Attorney Docket No. 2024730-7032322001.  8. Deposit account number: 50-2518	
The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §1.21 that may	be required by this paper, or to credit any overpayment to Deposit Account No. 50-2518	
The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §1.21 that may be required by this paper, or to credit any overpayment to Deposit Account No. 50-2518  DO NOT USE THIS SPACE		
9. Statement and signature.		
To the host of my knowledge and heliaf she formation to the second		
To the best of my knowledge and belief, the foregoing informatio original document.	n is true and correct and any attached copy is a true copy of the	
original document.		
Name: Michael J. Bolan	Date: 4/16/03	
Registration No. 42,339 Signature		
Total number of pages accessions	was short attachments and documents.	
Total number of pages comprising co	over sheet, attachments and document: 4	
Mail documents to be recorded with	required cover sheet information to:	
U.S. Patent and Trademark Office		
Office of Public Records		
Box Assignments Crystal Gateway 4, Room 335		
Crystal Gatew	ay 4, Koom 333	

### ASSIGNMENT OF PATENT APPLICATION

WHEREAS, we, Harold F. Carrison, a citizen of the United States, and Lex P. Jansen, a citizen of The Netherlands (hereinafter referred to as "ASSIGNORS"), have invented and own a certain invention entitled APPARATUS AND METHODS FOR REDUCING

COMPRESSION BONE FRACTURES USING HIGH STRENGTH RIBBED MEMBERS for which application for Letters Patent of the United States of America has been executed on even date herewith; and

WHEREAS, SCIMED Life Systems, Inc., a corporation organized and existing under and by virtue of the laws of the state of Minnesota and having its principal place of business at One Scimed Place, Maple Grove, MN 55311-1566 (hereinafter referred to as "ASSIGNEE"), is desirous of acquiring the exclusive right, title and interest in, to and under said invention and in, to and under any Patent or similar legal protection to be obtained therefor in the United States of America, its territorial possessions and in any and all countries foreign thereto.

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, ASSIGNORS hereby sells assign, transfer and set over unto the said ASSIGNEE, its successors and assigns, the full and exclusive right, title and interest to said invention and to all Letters Patent or application or similar legal protection, not only in the United States and its territorial possessions, but in all countries foreign thereto to be obtained for said invention by said application, and to any continuation, division, renewal, substitute or reissue thereof or any legal equivalent thereof in the United States or a foreign country for the full term or terms for which the same may be granted, including all priority rights under the International Convention;

and ASSIGNORS hereby authorize and request the United States Commissioner of Patents and Trademarks, and any officials of foreign countries whose duty it is to issue patents or any legal equivalent thereof, to issue said patents to ASSIGNEE, its successors and assigns, in accordance with this Assignment.

ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this Agreement;

ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said application, said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNORS and will testify as to the same in any interference or litigation related thereto and will promptly execute and deliver to ASSIGNEE or its legal representative any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents in the United States or in any foreign country, which may be necessary or desirable to carry out the purposes thereof.

9/29/03 Date

SEP 29, 2005

Harold F. Carrison

Lex P. Jappen

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	,
	ss.
County of <u>Alameda</u>	_
•	
On <u>09 /29 /03</u> before me,	Heidi Karan Nataru Pulalia
personally appeared Harold F. Carris	Nome and Tide of Officer (e.g., "June Doe, Notery Funds")
personally appeared Harold F. Carris	an & Lex P. Jansen
	Name(s) at Signer(s)
	Lipersonally known to me
Manage .	proved to me on the basis of satisfactor evidence
HEIDI RAXON	
Commission a some	to be the person(s) whose name(s) is/ere
California S	<ul> <li>subscribed to the within instrument and</li> </ul>
Atlameda County My Cornn. Expires Aug 2, 2008	acknowledged to me that he/she/fine) executed the same in his/her/their authorized
- Chuas Vnd 2' 5008	capacity(ies), and that by his/her/thei
	signature(s) on the instrument the person(s), o
•	the entity upon behalf of which the person(s
	acted, executed the instrument.
	WITNESS my hand and official seal.
·	1.1 0
·	Sorrellary of Notary Public
Though the information below is not regulred by law, it may be	TTIONAL   prove valuable to persons relying on the document and could prevent  prover this form to another document.
Though the information below is not regulred by law, it may be	TTIONAL - prove valuable to persons relying on the document and could prevent prove this form to another document.
Though the information below is not required by law, it may p fraudulent removal and reattach  Description of Attached Document	prove valuable to persons religing on the document and anula account
Though the information below is not required by law, it may present the information of Attached Document  Title or Type of Document	prove valuable to persons relying on the document and could prevent ament of this form to another document.
Though the information below is not required by law, it may prevent fraudulant removal and restract Description of Attached Document  Title or Type of Document  Document Date:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may present the information of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may present the information of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and reattach  Description of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages:
Though the information below is not required by law, it may prevent and restract pescription of Attached Document  Title or Type of Document  Document Date:  Signer(s) Other Than Named Above:	prove valuable to persons relying on the document and could prevent ament of this form to another document.  Number of Pages: